

Dear Committee Members:

I find myself sitting on my couch this morning, a Board Certified Behavior Analyst, living in Madison, Connecticut, drinking my coffee, contemplating, after another year gone by, how to express my support for SB 292. This bill has been designed to require the licensure of behavior analysts and assistant behavior analysts in the state of Connecticut. As I sit, my thoughts drift to the families I work with, and the ones I cannot.

Many of these families have been waiting for years to access appropriate, effective services for their children in their homes. All the while, behavioral excesses becoming more ingrained as part of these individuals repertoires. I ponder how long before the legislature takes action. Will this finally be the year, the progressive state in which I live, stop ignoring the insurmountable evidence that Behavior Analysis and the Board Certified clinicians who provide said services requires a licensing body? Enacting SB 292 ensures the protection of the citizens of Connecticut. It will allow families to more easily obtain services through private insurance. It goes without saying that citizens have these protections for many other applied fields. Should it be allowable for a podiatrist to perform a kidney transplant? Should the transplant surgeon be licensed in their field of practice? Although, the comparison of licensing medical practitioners to the question of licensing behavior analysts may seem extreme, the absence of the provision of applied behavior analytic services to consumers in need, although not always acute or life threatening, is insidious in nature. It can negatively impact all aspects that persons quality of life for their entire lives, limiting their freedom, access to their community and personal choice.

Consumers are sometimes forced to choose less than optimal alternatives while they wait for appropriate services, often from licensed professionals in related fields who are desperately just trying to help in the absence of collaboration with Behavior Analysts who can assist them with provision of evidence based practices and outcomes. Some examples of what occur while services are delayed indefinitely include: inadvertent reinforcement of harmful behaviors in order to avoid dangerous situations in the home, strengthening serious target behaviors; services from persons who are not qualified to provide applied behavioral analytic services, which can result in more harm than good or; medication use that may reduce dangerous behaviors but also makes it difficult for our consumers to learn any new appropriate behaviors.

So back to my drifting thoughts on this early Sunday morning. Have the parents of my clients, who have no access to services, been startled awake today at 3 a.m. again, their family members having awoken the entire household, exhibiting aggression to themselves, others or property? Have their parents lain awake all night grappling with the heart wrenching thoughts of how they are going to last one more day without calling 911 on their child? As I sip my coffee, are they assisting them with every aspect of bathing, getting dressed and eating, because there is no one to show them how to teach these skills to their child, who at this point in their lives, could be performing this skills independently? It is times such as this, that I remember what it is to love a child unconditionally, regardless of the things we as professionals see as obstacles. We as a society should be ashamed if we are not fully and completely doing everything we can to help these citizens and their families. It is not only our ethical responsibility, but a moral one as well.

This has been allowed to go on for far long. Best practices are well established, de-institutionalization a recognizable, ineffectual practice in the history of the field of social services in general. Yet, in 2016, in what is considered to be one of the most progressive areas of our country, families continue to be sequestered in their homes, clients denied services, unable to participate in their own communities.

How many more years and how many more citizens of this state are going to have delays for these services, during the time in their lives when they are needed most? Changing the trajectory of these people's lives is the responsibility of the legislative bodies of the state of Connecticut, and supporting SB 292 is one step in the right direction. The long term effects for the individual and their families is obvious, and the far reaching financial implications for the state, enormous.

Twenty four states have recognized the need for such a licensing in order to allow populations in need of these services to have access to proven, effective, applied behavior analytic treatments.

I do, without reservation, support SB 292. It is my responsibility as a BCBA to advocate for the families of the state of Connecticut and only hope that the State of Connecticut feels the same sense of responsibility.

Respectfully,

Deborah Olchek, M.A., BCBA